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CONFIRMATION NO. 5005

SERIAL NUMBER 10/031,245	FILING OR 371(c) DATE 04/29/2002 RULE	CLASS 379	GROUP ART UNIT 2642	ATTORNEY DOCKET NO. 136.164	
APPLICANTS Christian Collette, Verson, FRANCE; ** CONTINUING DATA ***** This application is a 371 of PCT/FR00/01012 04/18/2000 ** FOREIGN APPLICATIONS ***** FRANCE 99 04905 04/19/1999					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		STATE OR COUNTRY FRANCE	SHEETS DRAWING 2	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 2
ADDRESS PATTERSON. THUENTE, SKAAR & CHRISTENSEN, P.A. 4800 IDS CENTER 80 SOUTH 8TH STREET MINNEAPOLIS ,MN 55402-2100					
TITLE System for implementing telephone services, control unit for an automatic switch and telephone and computer integration server					
FILING FEE RECEIVED 1150	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		



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Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		STATE OR COUNTRY FRANCE	SHEETS DRAWING 2	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 2
ADDRESS James E Nilles Nilles & Nilles Firstar Center Suite 2000 777 East Wisconsin Avenue Milwaukee , WI 53202-5345					
TITLE System for implementing telephone services, control unit for an automatic switch and telephone and computer integration server					
FILING FEE RECEIVED 1150	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		